

Section 1: Cover Sheet

Office Use Only

Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Individual Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	Title Mrs. Last Name* Swor My employe	First Name* Amanda r is a 501c(3) non-profit organization	Suffix	Middle
EMPLOYING ENTITY	My employer behalf Entity/Organization Drenner Group	is registered as a business entity, pays a	an entity registration	on fee, and is reporting on my
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Busi 200 Lee Barton City* Austin	ness Street Address* Drive	Apartment or Suite 100 State* TX	Suite Number Zip Code* 78704
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing 200 Lee Barton City* Austin		Apartment or Suite 100 State* TX	Suite Number Zip Code* 78704

	☐ I am registering as a new lobbyist					
	☐ I am renewing my annual lobbyist registration					
	☐ I am updating my current registration information outside of a Quarterly Activity Reporting Period					
REPORT TYPE *	I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:					
Check all that apply	☑ January ☐ April ☐ July ☐ October					
	☐ I am correcting the information provided on a previously filed report Previous Report Type: Previous Report Date					
	I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.					



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

To report more than one municip	bai Question, click	tile Auu A	duttorial Muricipal Question	button	JEIOW.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning, neighborhood plan amendment and sale of property						
PROPERTY ADDRESS	description is		pertains to real property. *If ch		either a property address or legal		
OR	Address			Suite or	Apartment Number		
LEGAL DESCRIPTION	500 Montopolis						
	City			State	Zip Code		
	Austin			TX	78741		
	Property Legal Des	scription					
	. , ,	•					
0.1							
Subject Matter(s)*: Check all sub	ect matters that a	,	·				
Accessibility or Persons with I	Disabilities		mental Matters, Air or Water or Watershed Protection		Permits (Building, Site Plans)		
Affordability		Finance	, Budget, or Investments		Permits (Other)		
Animals			Healthcare, Mental Health, or Services		Public Safety, Policy, Fire, EMS, or Emergency Planning and Response		
Annexation		Historic	Preservation		Public Utilities, Energy, Water, Solid Waste, or Recycling		
Arts, Music, Film, Cultural or Creative Industries		Hospita Center	lity, Tourism, Events, or Conventic	on 🗌	Quality of Life Affairs		
Aviation		Human	Rights or Immigration	\boxtimes	Real Estate		
City Infrastructure or Public V	Vorks	Labor or Workforce			Rules, Proposed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	∠ Land Dealer ∠ L	evelopment or Land Use		Taxation or Fees		
Code Compliance		Municip	oal Court		Technology or Communications		
Construction		Municip	oal Legislation		Transportation or Mobility		
Contracts or Procurement		Neighbo	orhoods		Zoning or Platting		
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums				
Economic Development		Other:					



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To roport more than one manier	par Question, onon	tino maamaantionammamoipar eacotion i	outton bo	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	PUD Amendment			
PROPERTY ADDRESS	This municipal description is	al question pertains to real property. *If ch	ecked, eit	her a property address or legal
	Address		Suite or A	partment Number
OR Legal description				
LEGAL BESONII TION	City		State	Zip Code
	Property Legal De	scription		
	Lots 4A, 5A, 6A an	d 1C of the Four Points Center PUD		
Subject Matter(s)*· Check all sub	niect matters that	apply to the municipal question above		
Accessibility or Persons with		Environmental Matters, Air or Water Quality, or Watershed Protection	P	Permits (Building, Site Plans)
☐ Affordability		Finance, Budget, or Investments	P	Permits (Other)
Animals		Health, Healthcare, Mental Health, or Human Services		bublic Safety, Policy, Fire, EMS, or mergency Planning and Response
Annexation		Historic Preservation		Public Utilities, Energy, Water, Solid Waste or Recycling
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convention Center	n 🗆 C	Quality of Life Affairs
Aviation		Human Rights or Immigration	□ R	deal Estate
City Infrastructure or Public \	Vorks	Labor or Workforce	□ R	Rules, Proposed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	☐ Land Development or Land Use	П	axation or Fees
Code Compliance		Municipal Court	П	echnology or Communications
Construction		Municipal Legislation	T	ransportation or Mobility
Contracts or Procurement		☐ Neighborhoods	⊠ Z	oning or Platting
Diversity, Equity, or Inclusion	ı	Parks, Recreation, Libraries, or Museums		
Economic Development		Other:		



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*

Rezoning

PROPERTY ADDRESS	This municip		roperty. *If checked, either a	
OR	Audicss		Suite of Apartif	Terri Number
LEGAL DESCRIPTION				
	City		State	Zip Code
	Property Legal De	scription		
Subject Matter(s)*: Check all sul	bject matters that	apply to the municipal ques	tion above	
Accessibility or Persons with	Disabilities	Environmental Matters, A Quality, or Watershed Pro		ts (Building, Site Plans)
Affordability		Finance, Budget, or Invest	ments Permi	is (Other)
Animals		Health, Healthcare, Menta Human Services		Safety, Policy, Fire, EMS, or ency Planning and Response
Annexation		Historic Preservation	Public or Rec	Utilities, Energy, Water, Solid Waste ycling
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Even Center	ts, or Convention Qualit	y of Life Affairs
Aviation		Human Rights or Immigra	tion Real E	state
City Infrastructure or Public	Works	Labor or Workforce	Rules,	Proposed Rules, or Rule Making
Civil Service, Municipal Empl Retirement Systems	oyment, or	∠ Land Development or Land	d Use Taxati	on or Fees
Code Compliance		Municipal Court	Techn	ology or Communications
Construction		Municipal Legislation	☐ Transp	portation or Mobility
Contracts or Procurement		□ Neighborhoods	⊠ Zonino	g or Platting
Diversity, Equity, or Inclusion	1	Parks, Recreation, Librarie	es, or Museums	
Economic Development		Other:		



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To report more than one wunicip	oal Question, click	the Add Additional Municipal Question	button below.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning			
PROPERTY ADDRESS	This municipa description is Address	al question pertains to real property. *If c required.	hecked, either a p	
OR	10201 Jollyville Ro	ad		
LEGAL DESCRIPTION	City		State	Zip Code
	Austin		TX	78759
	Property Legal Des	cerintion		
	Froperty Legal Des	scription		
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipal question above		
Accessibility or Persons with I	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Building, Site Plans)
Affordability		Finance, Budget, or Investments	Permits (Other)
Animals		Health, Healthcare, Mental Health, or Human Services		fety, Policy, Fire, EMS, or cy Planning and Response
Annexation		Historic Preservation	Public Ut or Recycl	ilities, Energy, Water, Solid Waste, ling
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convent Center	ion Quality o	f Life Affairs
Aviation		☐ Human Rights or Immigration	Real Esta	te
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pr	oposed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or Land Use	☐ Taxation	or Fees
Code Compliance		Municipal Court	Technolo	ogy or Communications
Construction		Municipal Legislation	☐ Transpor	tation or Mobility
Contracts or Procurement		Neighborhoods		r Platting
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museums	S	
Economic Development		Other:		

Add Additional Municipal Question

Delete this page

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Add Additional Municipal Question

Lobbyist Reporting Form

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning and PDA	Amendment			
PROPERTY ADDRESS	This municipa description is Address	Il question pertains to real proper required.	ty. *If checked, either a p		
OR LEGAL DESCRIPTION	7700 Parmer Lane				
LEGAL DESCRIPTION	City		State	Zip Code	
	Austin		TX	78729	
	Property Legal Des	scription			
Subject Matter(s)*: Check all sub	piect matters that	apply to the municipal question a	hove		
Subject Matter(s) . Check all sub	geet matters that	Environmental Matters, Air or V			
Accessibility or Persons with I	Disabilities	Quality, or Watershed Protection		(Building, Site Plans)	
Affordability		Finance, Budget, or Investments	S Permits ((Other)	
Animals		Health, Healthcare, Mental Hea Human Services		fety, Policy, Fire, EMS, or cy Planning and Response	
Annexation		Historic Preservation	Public Ut or Recycl	cilities, Energy, Water, Solid Waste, ling	
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Center	Convention Quality o	of Life Affairs	
Aviation		Human Rights or Immigration	Real Esta	te	
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pr	Rules, Proposed Rules, or Rule Making	
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or Land Use	☐ Taxation	or Fees	
Code Compliance		Municipal Court	Technolo	ogy or Communications	
Construction		Municipal Legislation	☐ Transpor	tation or Mobility	
Contracts or Procurement		☐ Neighborhoods	Zoning o	r Platting	
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or N	J useums		
Economic Development		Other:			

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To report more than one wunicip	oal Question, click	the Add Additi	onal Municipal Question	button be	elow.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning					
PROPERTY ADDRESS	This municipa description is Address		iins to real property. *If ch		ither a prop	
OR	2500 N. Lamar				-	
LEGAL DESCRIPTION	City			State		Zip Code
	Austin			TX		78705
						70700
	Property Legal Des	scription				
Subject Matter(s)*: Check all sub	ject matters that	apply to the mu	nicipal question above			
Accessibility or Persons with I	Disabilities	Environmen Quality, or V	tal Matters, Air or Water Vatershed Protection		Permits (Bui	lding, Site Plans)
Affordability		Finance, Bud	lget, or Investments		Permits (Oth	ner)
Animals		Health, Heal	thcare, Mental Health, or ices			y, Policy, Fire, EMS, or Planning and Response
Annexation		Historic Pres	ervation		Public Utilities or Recycling	es, Energy, Water, Solid Waste
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Center	Tourism, Events, or Convention	on 🗌	Quality of Lit	fe Affairs
☐ Aviation		Human Righ	ts or Immigration		Real Estate	
City Infrastructure or Public V	Vorks	Labor or Workforce			Rules, Propo	osed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Develo	pment or Land Use		Taxation or I	Fees
Code Compliance		Municipal Co	ourt		Technology	or Communications
Construction		Municipal Le	gislation		Transportati	on or Mobility
Contracts or Procurement		☐ Neighborhoo	ods	\boxtimes	Zoning or Pla	atting
Diversity, Equity, or Inclusion		Parks, Recre	ation, Libraries, or Museums			
Economic Development		Other:				

Add Additional Municipal Question

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Lobbyist Reporting Form

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To Toport Moro than one Manier	our Question, onon	1110 7100	Maditional Maniolpai Question	Datto	00.011.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Applicability of Res	strictive Co	venant			
PROPERTY ADDRESS	description is	•	n pertains to real property. *If ch			, o
OR	Address			Suite o	r Apartment I	vumber
LEGAL DESCRIPTION	6901 Old Bee Cave	es Road				
	City			State		Zip Code
	Austin			TX		78735
	Property Legal Des	scription				
	iort matters that	annly to t	he municinal question above			
Accessibility or Persons with I	-	Enviro	onmental Matters, Air or Water ty, or Watershed Protection		Permits (Bu	ilding, Site Plans)
Affordability		☐ Finan	ce, Budget, or Investments		Permits (Otl	her)
Animals			h, Healthcare, Mental Health, or In Services			y, Policy, Fire, EMS, or Planning and Response
Annexation		☐ Histor	ric Preservation		Public Utiliti or Recycling	ies, Energy, Water, Solid Waste, I
Arts, Music, Film, Cultural or Creative Industries		☐ Hospi Cente	tality, Tourism, Events, or Conventio er	on _	Quality of Li	fe Affairs
Aviation		☐ Huma	n Rights or Immigration		Real Estate	
City Infrastructure or Public V	Vorks	Labor	or Workforce		Rules, Propo	osed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land	Development or Land Use] Taxation or	Fees
Code Compliance		☐ Muni	cipal Court] Technology	or Communications
Construction		☐ Muni	cipal Legislation] Transportat	ion or Mobility
Contracts or Procurement		☐ Neigh	borhoods	\boxtimes	Zoning or Pl	atting
Diversity, Equity, or Inclusion		Parks	, Recreation, Libraries, or Museums			
Economic Development		Other	:			

Delete this page

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Add Additional Municipal Question

Lobbyist Reporting Form

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Development Permit						
PROPERTY ADDRESS	This municipal description is	al question pertains to real property. *If one state is required.		er a property address or legal			
OR	3000-3004 Monto	opolis Dr					
LEGAL DESCRIPTION			-				
	City		State	Zip Code			
	Austin		TX	78741			
	Property Legal De	escription					
Subject Matter(s)*· Check all sub	lect matters that	apply to the municipal question above					
Accessibility or Persons with I	-	Environmental Matters, Air or Water Quality, or Watershed Protection	⊠ Per	rmits (Building, Site Plans)			
☐ Affordability		Finance, Budget, or Investments	Per	mits (Other)			
Animals		Health, Healthcare, Mental Health, or Human Services		olic Safety, Policy, Fire, EMS, or ergency Planning and Response			
Annexation		Historic Preservation		olic Utilities, Energy, Water, Solid Waste, Recycling			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convent Center	ion 🗌 Qu	ality of Life Affairs			
Aviation		Human Rights or Immigration	Rea	al Estate			
City Infrastructure or Public V	Vorks	Labor or Workforce	Rul	es, Proposed Rules, or Rule Making			
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or Land Use	□ Тах	ration or Fees			
Code Compliance		Municipal Court	Tec	chnology or Communications			
Construction		Municipal Legislation	☐ Tra	nsportation or Mobility			
Contracts or Procurement		☐ Neighborhoods	Zor	ning or Platting			
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museum	S				
Economic Development		Other:					

Delete this page

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To report more than one wunicip	oal Question, click	the Add	Additional Municipal Question I	button t	below.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning					
PROPERTY ADDRESS	This municipa description is	•	pertains to real property. *If ch		either a prop	
OR						
LEGAL DESCRIPTION	City			Class		7' 0 - 1.
	City			State		Zip Code
	Property Legal Des	cription				
	Northwest corner	of Metric B	lvd at Research Blvd in Austin, TX			
Subject Matter(s)*: Check all sub	lect matters that a	apply to th	ne municipal question above			
Accessibility or Persons with I	-	Enviro	nmental Matters, Air or Water y, or Watershed Protection		Permits (Bui	lding, Site Plans)
☐ Affordability			e, Budget, or Investments		Permits (Oth	ner)
Animals			ı, Healthcare, Mental Health, or n Services			, Policy, Fire, EMS, or Planning and Response
Annexation		Histor	c Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste,
Arts, Music, Film, Cultural or Creative Industries		Hospit	ality, Tourism, Events, or Conventio	n 🗌	Quality of Li	fe Affairs
☐ Aviation		☐ Huma	n Rights or Immigration		Real Estate	
City Infrastructure or Public V	Vorks	Labor	or Workforce		Rules, Propo	sed Rules, or Rule Making
Civil Service, Municipal Emplo	oyment, or	Land [Development or Land Use		Taxation or I	Fees
Code Compliance		Munic	ipal Court		Technology	or Communications
Construction		Munic	ipal Legislation		Transportati	on or Mobility
Contracts or Procurement		☐ Neighl	oorhoods	\boxtimes	Zoning or Pla	atting
Diversity, Equity, or Inclusion		Parks,	Recreation, Libraries, or Museums			
Economic Development		Other				



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To report more than one munici	pai Question, ciici	tile Auu A	aditional ividilicipal Question	Dutton	Jeiow.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Development Permit and Density Bonus						
PROPERTY ADDRESS	description is		ertains to real property. *If cl			, ,	
OR	Address			Suite or	Apartment N	lumber	
LEGAL DESCRIPTION	600 Guadalupe						
	City			State		Zip Code	
	Austin			TX		78701	
	Property Legal De	escription					
	1 7 3						
Subject Matter(s)*: Check all sub	oject matters that	apply to the	municipal question above				
Accessibility or Persons with	Disabilities		mental Matters, Air or Water or Watershed Protection	\boxtimes	Permits (Bui	ilding, Site Plans)	
Affordability		Finance	Budget, or Investments		Permits (Oth	ner)	
Animals		Health,	Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic	Preservation		Public Utiliti or Recycling	es, Energy, Water, Soli	d Waste,
Arts, Music, Film, Cultural or Creative Industries		Hospital Center	ity, Tourism, Events, or Conventi	on 🗌	Quality of Li	fe Affairs	
Aviation		☐ Human	Rights or Immigration		Real Estate		
City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Propo	osed Rules, or Rule Mak	ting
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land De	velopment or Land Use		Taxation or I	Fees	
Code Compliance		Municip	al Court		Technology	or Communications	
Construction		Municip	al Legislation		Transportati	ion or Mobility	
Contracts or Procurement		☐ Neighbo	orhoods		Zoning or Pla	atting	
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums	i			
Economic Development		Other:					



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*

Annexation History

This municipal question pertains to real property. *If checked, either a property address or legal description is required.

Address

Suite or Apartment Number

City

State

Zip Code

OD			¬ ———	
OR				
LEGAL DESCRIPTION	City		State	Zip Code
	Property Legal De	escription		
Subject Matter(s)*: Check all sub	ject matters that	t apply to the municipal question above		
Accessibility or Persons with I	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)
☐ Affordability		Finance, Budget, or Investments	Permits (Ot	her)
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response
		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste J
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convent Center	ion	ife Affairs
Aviation		Human Rights or Immigration	Real Estate	
City Infrastructure or Public W	Vorks	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or Land Use	Taxation or	Fees
Code Compliance		Municipal Court	Technology	or Communications
Construction		Municipal Legislation	☐ Transportat	ion or Mobility
Contracts or Procurement		Neighborhoods	Zoning or P	latting
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museums	S	
Economic Development		Other:		



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Floodplain Modifications					
PROPERTY ADDRESS	This municip description is		ertains to real property. *If ch		either a prop	
OR	702 E. 3rd Street				•	
LEGAL DESCRIPTION	City			State		Zip Code
	Austin			TX		78701
	Property Legal De	escription				
Subject Matter(s)*: Check all sub	ject matters that	apply to the	municipal question above			
Accessibility or Persons with I	-	Environ	mental Matters, Air or Water or Watershed Protection	\boxtimes	Permits (Bui	lding, Site Plans)
Affordability		Finance	, Budget, or Investments		Permits (Oth	ner)
Animals		Health,	Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response
Annexation		Historic	Preservation		Public Utilities or Recycling	es, Energy, Water, Solid Waste,
Arts, Music, Film, Cultural or Creative Industries		Hospital Center	lity, Tourism, Events, or Conventio	n 🗌	Quality of Life	fe Affairs
□ Aviation		☐ Human	Rights or Immigration		Real Estate	
City Infrastructure or Public V	Vorks	Labor o	Workforce		Rules, Propo	osed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land De	velopment or Land Use		Taxation or I	Fees
Code Compliance		Municip	al Court		Technology	or Communications
Construction		Municip	al Legislation		Transportati	on or Mobility
Contracts or Procurement		☐ Neighbo	orhoods		Zoning or Pla	atting
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums			
Economic Development		Other:				



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: **Municipal Question**

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one wunicip	oal Question, click	the Add Additional Municipal Questio	on button below.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Downtown Density Bonus					
PROPERTY ADDRESS	This municipa description is Address	al question pertains to real property. *If required.	f checked, either a pro			
OR	410 W. 18th Street	t				
LEGAL DESCRIPTION	City		State	Zip Code		
	Austin		TX	78701		
	Property Legal Des	cerintion				
	Property Legal Des	scription				
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipal question above				
Accessibility or Persons with I	Disabilities	☐ Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (B	uilding, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (C	other)		
Animals		Health, Healthcare, Mental Health, or Human Services		ety, Policy, Fire, EMS, or y Planning and Response		
Annexation		Historic Preservation	Public Util or Recyclir	ities, Energy, Water, Solid Waste, ng		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convergence Center	ntion	Life Affairs		
☐ Aviation		Human Rights or Immigration	Real Estate	е		
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	posed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	□ Land Development or Land Use	☐ Taxation o	r Fees		
Code Compliance		Municipal Court	Technolog	y or Communications		
Construction		Municipal Legislation	☐ Transporta	ation or Mobility		
Contracts or Procurement		☐ Neighborhoods	Zoning or	Platting		
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museum	ms			
Economic Development		Other:				



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable *			
	KEEP Real Estate			
	Client Business Address*	Client Apartment or	Suite Number	
QUENT	108 Chicon St			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	TX	78702	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount		
CLIENT	less than \$10,000	OR			
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):				
* In discase a supervisor of Godel					

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period				
CLIENT NAME					
Client is an individual	Organization Name or Client Last Name, as applicable*				
	Brandywine Realty Trust				
OUTNIT	Client Business Address* 111 Congress Avenue	Client Apartment or 30th Floor	Suite Number		
CLIENT	Client City*	Client State*	Client Zip Code *		
ADDRESS	Austin	TX	· · · · · · · · · · · · · · · · · · ·		
AND	Austin	IX	78701		
NATURE OF	Nature of Client's Business*				
BUSINESS	Real Estate Development				
	<u>'</u>				

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

OUENT	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			
* Indicator a naminal field				

Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period				
	<u> </u>				
CLIENT NAME					
Client is an individual	Organization Name or Client Last Name, as applicable*				
one it is all marvidual	organization Name of official East Name, as applicable				
	Barton Creek Capital				
	Client Business Address*	Client Apartment or	r Suite Number		
OUTSUT	515 Congress Ave	Suite 1515			
CLIENT	Olivet City*	0111-01-1-*	0111-7101-*		
ADDRESS	Client City*	Client State*	Client Zip Code*		
AND	Austin	ТХ	78701		
NATURE OF					
NATURE OF	Nature of Client's Business*				
BUSINESS	Real Estate Development				
	·				

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

QUENT	Compensation Category*	-	(\$) Exact Amount		
CLIENT	less than \$10,000	OR			
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):				
* Indicator a required field					

Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
Client is an individual	Organization Name or Client Last Name, as applicable* Great Hills Retail Inc.			
	Client Business Address* 191 North Wacker Drive	Client Apartment or 2500	Suite Number	
CLIENT ADDRESS AND	Client City* Chicago	Client State*	Client Zip Code*	
NATURE OF BUSINESS	Nature of Client's Business* Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer compensation totaling \$500,000 or more.		amount is required
	If you fail to provide the above Client Compensation in	formation	, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	Accesso Partners			
QUENT	Client Business Address* 1021 Main Street	Client Apartment or Suite 1920	Suite Number	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Houston	TX	77002	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compe for compensation totaling \$500,000 or more.		amount is required
	If you fail to provide the above Client Compensation inf	ormation	, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
onone is an individual	organization Nume of official East Nume, as applicable			
	2501 Lamar LLC			
	Client Business Address*	Client Apartment or	Suite Number	
OUENT	2501 N. Lamar	Suite 300		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	TX	78705	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation in		

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME				
☐ Client is an individual	Organization Name or Client Last Name, as applicable* Manifold Real Estate			
	Client Business Address* P.O. Box 200463	Client Apartment of	r Suite Number	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND NATURE OF	Austin Nature of Client's Business*	TX	78720	
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

OUENT	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
* Indicator a naminal field			

Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	QuikTrip Corporation			
	Client Business Address* 227 North Loop 1604 E	Client Apartment or	Suite Number	
CLIENT	227 North 1004 E	130		
ADDRESS	Client City*	Client State *	Client Zip Code*	
AND	San Antonio	TX	78232	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*	1	(\$) Exact Amount
OLILIVI	less than \$10,000	OR	
COMPENSATION		-	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation in	nformation,	, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME				
☐ Client is an individual	Organization Name or Client Last Name, as applicable*			
one it is all individual				
	FF Realty III LLC			
	Client Business Address*	Client Apartment or	Suite Number	
0.1-1-	5510 Morehouse Drive	Suite 200		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	San Diego	CA	92121	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
* 1			

* Indicates a required field

Add Another Client Page



Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable* LO/LDP 600 Guadalupe LLC		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 12117 Bee Cave Road Client City* Austin Nature of Client's Business* Real Estate Development	Client Apartment or 202 Client State* TX	Client Zip Code*

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more.	ensation a	amount is required
	If you fail to provide the above Client Compensation in	formation,	provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	Asbury Automotive Group			
	Client Business Address* 2905 Premiere Pkway	Client Apartment or Suite 300	Suite Number	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Duluth	GA	30097	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compe for compensation totaling \$500,000 or more.		amount is required
	If you fail to provide the above Client Compensation inf	ormation	, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Transwestern		
CLIENT	Client Business Address* 901 S. Mopac Expwy, Building 4	Client Apartment or Ste. 250	Suite Number
	Client City*	Client State*	Client Zip Code*
ADDRESS	Austin	TX	78746
AND	Austin		76746
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. ma		
* In all a days are so that I did a lat			

* Indicates a required field

Add Another Client Page



Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable * TBB Development LLC		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 2111 Kramer Ln Client City* Austin Nature of Client's Business* Real Estate	Client Apartment of Client State* TX	Client Zip Code*

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. ma		
* In all a days are so that I did a lat			

* Indicates a required field

Add Another Client Page



Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

NO EMPLOYEES TO REPORT		red or retained no employees	during the	applicable r	eporting period
PERSON	Title	First Name*			Middle
EMPLOYED OR	Last Name *		Su	ffix]
RETAINED	Employer*		Od	ccupation*	
BUSINESS	Business Addre	ess*		•	r Suite Number
ADDRESS	City*			State*	Zip Code*
MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER	Council Men	n identified above related (within nber, or a member of their house the nature of their employment	hold, as def	ined in City C	code Section 4-8-6(A)(5)?
	First Name of N	Mayor/Council Member	Last Na	ame of Mayo	r/Council Member

* Indicates a required field

Add Another Employee Page

Sections 5, 6 and 7 are for filing Quarterly Activity Reports or a Termination of Lobbyist Registration.

If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



Section 5: Statement of No Activity

STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED.

Lobbyists who have no reportable activity for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the No Activity Confirmation, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

No Activity Confirmation ☐ I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

	(\$) Reimbursement to Others	
	(\$) Food and Beverages	
	(\$) Transportation and Lodging	
	(\$) Gifts (other than Awards and Mementos)	
EXPENDITURE	(\$) Entertainment	
TOTALS (Blank values will be interpreted as \$0)	(\$) Awards and Mementos	
	(\$) Honorariums	
	(\$) Attendance of Council Members at Charitable Events or Fundraisers	
	(\$) Media Communications (broadcast, print, advertising, etc.)	
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)	



Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

Add Another Expenditure Page

PAYEE NAME AND	Organization Name or Payee Last Name,	as applicable*]	
BUSINESS INTEREST	☐ This payee is a business or business interest of a City Official			
Payee is an individual	If yes, First Name of City Official		Last Name of City Official	
	Department of City Official		Job Title of City Officia	al
PAYEE ADDRESS	Payee Address/ PO Box* Payee City*		Payee Apartmen	t or Suite Number Payee Zip Code*
EXPENDITURE DETAILS	(\$) Expenditure Amount* Expendit Purpose of the Expenditure*	ure Date* Cate	gory*	
Identify each City Official who benefitted from or who may have been influenced by the expenditure, if applicable				
City Official First Name	City Official Last Name	Depart	ment	Job Title

Delete this page

34 Revised: 9/25/2017



Section 8: Declaration and Electronic Submission

DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

Amanda Swor	1/8/2018
Typed Name	Report Date*

Electronic Submission and Signature

I have completed a Lobbyist Contact Information Form, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.